

June 26, 2017

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12<sup>th</sup> Street Washington, D.C. 20554

Re: CONFIDENTIAL FINANCIAL STATEMENT – SUBMITTED PURSUANT TO 47 C.F.R. § 54.313(f)(2)

Dear Ms. Dortch:

Enclosed herein is a redacted copy of the Confidential Financial Statement of Northeast Missouri Rural Telephone Company, Study Area Code 421931 in accordance with 47 C.F.R. § 54.313(f)(2) of the Commission's rules. Northeast Missouri Rural Telephone Company has redacted its entire Confidential Financial Statement.

Respectfully submitted,

Daryn Parker

Senior Financial Consultant

| FCC For | rm 481 - Carrier Annual Reporting Data Collection Form                   | REDACTED FOR PUBLIC INSPECTION    | OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|---------|--|-----------------------------------|---|
| <010>   | Study Area Code  | 421931                            |   |
| <015>   | Study Area Name  | NORTHEAST MISSOURI RURAL TEL. CO. |   |
| <020>   | Program Year   | 2018                              |   |
| <030>   | Contact Name: Person USAC should conta<br>with questions about this data | Daryn Parker                      |   |
| <035>   | Contact Telephone Number:<br>Number of the person identified in data li  | 7192664334 ext.<br>ine <030>      |   |
| <039>   | Contact Email Address:<br>Email of the person identified in data line    | e<030> dparker@tcatel.com         |   |
|         | Form T   | Type 54.313 and 54.422            |   |

FCC Form 481

| (200) Service Outage Reporting (Voice) | FCC Form 481  |
|--|---|
| Data Collection Form                   | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|  | July 2013   |

| <010> | Study Area Code 42  |                |                |                | 421931            |              |                    |         |         |         |         |         |
|-------|---|----------------|----------------|----------------|-------------------|--------------|--------------------|---------|---------|---------|---------|---------|
| <015> | Study Area Na   | ame            |                |                |                   | NORTHEAST MI | ISSOURI RURAL TEL. | CO.     |         |         |         |         |
| <020> | Program Year  |                |                |                | 2018              |              |                    |         |         |         |         |         |
| <030> | Contact Name - Person USAC should contact regarding this data                   |                |                |                | Daryn Parke       | r            |                    |         |         |         |         |         |
| <035> | Contact Telephone Number - Number of person identified in data line <030>       |                |                |                | > 7192664334      | ext.         |                    |         |         |         |         |         |
| <039> | > Contact Email Address - Email Address of person identified in data line <030> |                |                | > dparker@tca  | tel.com           |              |                    |         |         |         |         |         |
| <210> | For the prior   | r calendar yea | ar, were there | e any reportal | ole voice service | e outages?   | No                 |         |         |         |         |         |
| <220> | <a></a>   | <b1></b1>      | <b2></b2>      | <b3></b3>      | <b4></b4>         | <c1></c1>    | <c2></c2>          | <d></d> | <e></e> | <f></f> | <g></g> | <h></h> |

| > | <a></a>   | <b1></b1>           | <b2></b2>           | <b3></b3>  | <b4></b4>  | <c1></c1>                 | <c2></c2>              | <d></d>        | <e></e>            | <f></f>         | <g></g>        | <h>&gt;</h>  |
|---|-----------|---------------------|---------------------|------------|------------|---------------------------|------------------------|----------------|--------------------|-----------------|----------------|--------------|
|   | NORS      |                     |                     |            |            |                           |                        |                |                    | Did This Outage |                |              |
|   | Reference | <b>Outage Start</b> | <b>Outage Start</b> | Outage End | Outage End | Number of                 |                        | 911 Facilities | Service Outage     | Affect Multiple |                | 1            |
|   | Number    | Date                | Time                | Date       |            | <b>Customers Affected</b> | <b>Total Number of</b> | Affected       | Description (Check | Study Areas     | Service Outage | Preventative |
|   |           |                     |                     |            |            |                           | Customers              | (Yes / No)     | all that apply)    | (Yes / No)      | Resolution     | Procedures   |
|   |           |                     |                     |            |            |                           |                        |                |                    | •               |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                | ı            |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                | 1            |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
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|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                | <u> </u>     |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                | 1            |
|   |           |                     |                     |            |            |                           | _                      |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |
|   |           |                     |                     |            |            |                           |                        |                |                    |                 |                |              |

| •   | fulfilled Service Request<br>ection Form                                      |                                   | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-081<br>July 2013 | 9 |
|---|---|-----------------------------------|---|---|
|   |   |                                   |   |   |
| <010>   | Study Area Code   | 421931                            |   |   |
| <015>   | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. |   |   |
| <020>   | Program Year  | 2018                              |   |   |
| <030>   | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker                      |   |   |
| <035>   | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.                   |   |   |
| <039>   | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com                |   |   |
| <300> U                                       | nfulfilled service request (voice)  | NA                                |   |   |
| <310> [                                       | Detail on attempts (voice)  |                                   |   |   |
|   | Na  | me of Attached Document           |   |   |
| <320> Unfulfilled service request (broadband) |   | NA                                |   |   |
| <330>   | Detail on attempts (broadband)  | Name of Attached Document         |   |   |

| (400) Number of Complaints per 1,000 customers | FCC Form 481  |
|--|---|
| Data Collection Form                           | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|  | July 2013   |

| <010> | Study Area Code   | 421931  |                    |
|-------|---|---|--------------------|
| <015> | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO.                               |                    |
| <020> | Program Year  | 2018  |                    |
| <030> | Contact Name - Person USAC should conta   | ct regarding this data Darys                                    | ı Parker           |
| <035> | Contact Telephone Number - Number of possible contact Telephone Number - Number - Number of possible contact Telephone Number - | erson identified in data line                                   | 7192664334 ext.    |
| <039> | Contact Email Address - Email Address of p <030>  | erson identified in data line                                   | dparker@tcatel.com |
| <400> | Select from the drop-down list to indicate had voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or ot  | telephony service in the prion you are designated an ETC f      |                    |
| <410> | Complaints per 1000 customers for fixed vo  | pice  | 0.0                |
| <420> | Complaints per 1000 customers for mobile  | voice   |                    |
| <430> | Select from the drop-down list to indicate I end-user customer complaints (zero or gre the prior calendar year for each service are an ETC for any facilities you own, operate,   | ater) for broadband service ir<br>a in which you are designated |                    |
| <440> | Complaints per 1000 customers for fixed b   | roadband  | 0.0                |
| <450> | Complaints per 1000 customers for mobile  | broadband   |                    |

|       | npliance With Service Quality Standards and Consumer Protection Rules ection Form                    |                                   | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |  |  |  |  |
|-------|--|-----------------------------------|--|--|--|--|--|
| <010> | Study Area Code  | 421931                            |  |  |  |  |  |
| <015> | Study Area Name  | NORTHEAST MISSOURI RURAL TEL. CO. |  |  |  |  |  |
| <020> | Program Year   | 2018                              |  |  |  |  |  |
| <030> | Contact Name - Person USAC should contact regarding this data  | Daryn Parker                      |  |  |  |  |  |
| <035> | Contact Telephone Number - Number of person identified in data line <030>                            | 7192664334 ext.                   |  |  |  |  |  |
| <039> | Contact Email Address - Email Address of person identified in data line <030>                        | dparker@tcatel.com                |  |  |  |  |  |
| <500> | <500> Certify compliance with applicable service quality standards and consumer protection rules Yes |                                   |  |  |  |  |  |
|       |  | 421931MO510.pdf                   |  |  |  |  |  |
| <510> | Descriptive document for Service Quality Standards & Consumer Protection R                           | ules Compliance                   |  |  |  |  |  |
| <515> | <515> Certify compliance with applicable minimum service standards                                   |                                   |  |  |  |  |  |

|       | unctionality in Emergency Situations RE<br>ollection Form                | EDACTED FOR PUBLIC INSPECTION     | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013 |
|-------|--|-----------------------------------|--|
| <010> | Study Area Code  | 421931                            |  |
| <015> | Study Area Name  | NORTHEAST MISSOURI RURAL TEL. CO. |  |
| <020> | Program Year   | 2018                              |  |
| <030> | Contact Name - Person USAC should contact regarding this data            | Daryn Parker                      |  |
| <035> | Contact Telephone Number - Number of person identified in data line <    | <030> 7192664334 ext.             |  |
| <039> | Contact Email Address - Email Address of person identified in data line  | <030> dparker@tcatel.com          |  |
| <600> | Certify compliance regarding ability to function in emergency situations | Yes                               |  |
| <610> | Descriptive document for Functionality in Emergency Situations           | 421931MO610.pdf                   |  |

| (700) Price Offo   | erings including Voice Rate Data<br>n Form  |                                   | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013 |  |  |
|--|---|-----------------------------------|--|--|--|
| <010> Study  | Area Code   | 421931                            |  |  |  |
| <015> Study  | Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. | NORTHEAST MISSOURI RURAL TEL. CO.  |  |  |
| <020> Progra   | am Year   | 2018                              | 2018   |  |  |
| <030> Conta  | ct Name - Person USAC should contact regarding this c                                   | data Daryn Parker                 |  |  |  |
| <035> Conta  | ct Telephone Number - Number of person identified in                                    | n data line <030> 7192664334 ext. |  |  |  |
| <039> Contact Email Address - Email Address of person identified in data line <030> dparker@tcatel.com |   |                                   |  |  |  |
|  | ial Local Service Charge Effective Date  ate-wide Residential Local Service Charge  18. | 1/2017                            |  |  |  |

| <703> | <a1></a1> | <a2></a2>       | <a3></a3>  | <b1></b1> | <b2></b2>         | <b3></b3>                    | <b4></b4>                    | <b5></b5>               | <c></c>                       |
|-------|-----------|-----------------|------------|-----------|-------------------|------------------------------|------------------------------|-------------------------|-------------------------------|
|       | Chata     | 5 about (U.50)  | CAC (CETC) | B.1. T    | Residential Local | Chata C. handhaaltaa Chaasa  | Chata Hat a sale can be Face | Mandatory Extended Area | T. I. I P B. I I F            |
| ŀ     | State     | Exchange (ILEC) | SAC (CETC) | Rate Type | Service Rate      | State Subscriber Line Charge | State Universal Service Fee  | Service Charge          | Total per line Rates and Fees |
| ŀ     |           |                 |            |           |                   |                              |                              |                         |                               |
| ŀ     |           |                 |            |           |                   |                              |                              |                         |                               |
|       |           |                 |            |           |                   |                              |                              |                         |                               |
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|       |           |                 |            |           |                   |                              |                              |                         |                               |
|       |           |                 |            |           | See at            | tached worksheet             |                              |                         |                               |
|       |           |                 |            |           |                   | 101100                       |                              |                         |                               |
|       |           |                 |            |           |                   |                              |                              |                         |                               |
|       |           |                 |            |           |                   |                              |                              |                         |                               |
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| ŀ     |           |                 |            |           |                   |                              |                              |                         |                               |
| ŀ     |           |                 |            |           |                   |                              |                              |                         |                               |
| ŀ     |           |                 |            |           |                   |                              |                              |                         | †                             |
| ŀ     |           |                 |            |           |                   |                              |                              |                         |                               |
| ŀ     |           |                 |            |           |                   |                              |                              |                         |                               |
| ŀ     |           |                 |            |           |                   |                              |                              |                         | +                             |
| -     |           |                 |            |           |                   |                              |                              |                         | +                             |
|       |           |                 |            |           |                   |                              |                              |                         |                               |

| (710) Broadbrand Price Offerings | FCC Form 481  |
|----------------------------------|---|
| Data Collection Form             | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|                                  | July 2013   |

| <010> | Study Area Code   | 21931                             |
|-------|---|-----------------------------------|
| <015> | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. |
| <020> | Program Year  | 2018                              |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker                      |
| <035> | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.                   |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com                |

| <711> | <a1></a1> | <a2></a2>       | <b1></b1>        | <b2></b2>                   | <c></c>             | <d1></d1>                                       | <d2></d2>                                  | <d3></d3>               | <d4></d4>   |
|-------|-----------|-----------------|------------------|-----------------------------|---------------------|---|--|-------------------------|---|
|       | State     | Exchange (ILEC) | Residential Rate | State Regulated<br>Fees     | Total Rate and Fees | Broadband Service -<br>Download Speed<br>(Mbps) | Broadband Service -<br>Upload Speed (Mbps) | Usage Allowance<br>(GB) | Usage Allowance<br>Action Taken When<br>Limit Reached {select } |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  | 0                           | . 1                 |   |  |                         |   |
|       |           |                 |                  | - See attacl<br>worksheet - | nea                 |   |  |                         |   |
|       |           |                 |                  | worksneet -                 |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
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|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |
|       |           |                 |                  |                             |                     |   |  |                         |   |

| . , . | erating Companies<br>lection Form |   |                                   | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|-------|-----------------------------------|---|-----------------------------------|---|
|       |                                   |   |                                   | July 2013   |
|       |                                   |   |                                   |   |
| <010> | Study Area Code                   |   | 421931                            |   |
| <015> | Study Area Name                   |   | NORTHEAST MISSOURI RURAL TEL. CO. |   |
| <020> | Program Year                      |   | 2018                              |   |
| <030> | Contact Name - Person l           | JSAC should contact regarding this data               | Daryn Parker                      |   |
| <035> | Contact Telephone Num             | ber - Number of person identified in data line <030>  | 7192664334 ext.                   |   |
| <039> | Contact Email Address -           | Email Address of person identified in data line <030> | dparker@tcatel.com                |   |
|       |                                   |   |                                   |   |
| <810> | Reporting Carrier                 | Northeast Missouri Rural Telephone                    |                                   |   |
| <811> | Holding Company                   | Not Applicable  |                                   |   |
| <812> | Operating Company                 | Northeast Missouri Rural Telephone                    |                                   |   |

| 313> | <a1></a1>  | <a2></a2> | <a3></a3>                                      |
|------|------------|-----------|--|
|      | Affiliates | SAC       | Doing Business As Company or Brand Designation |
|      |            |           |  |
|      |            |           |  |
|      |            |           |  |
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|   | bal Lands Reporting<br>lection Form   |  | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013 |
|---|---|--|--|
| <010><br><015><br><020><br><030><br><035><br><039><br><900>       | Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Does the filing entity offer tribal land services? (Y/N)  Tribal Land(s) on which ETC Serves   | A21931  NORTHEAST MISSOURI RURAL TEL. CO.  2018  Daryn Parker  7192664334 ext.  dparker@tcatel.com  No |  |
| <920>   | Tribal Government Engagement Obligation   | Name of Attached   | Document   |
| to confi<br>demons  | company serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached PDF, on line 920, strates coordination with the Tribal government pursuant to 3(a)(9) includes:  | Select<br>Yes or No or<br>Not Applicable   |  |
| <921> <922> <923> <924> <925> <926> <927> <928> <927> <928> <929> | Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules Compliance with Environmental Review processes Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements. |  |  |

|          | REDACTED FOR PUBLIC INSPECTION   |       |   |   |   |  |
|----------|--|-------|---|---|---|--|
| (1000) V | oice and Broadband Service Rate Comparability                                |       |   | FCC Form 481  |   |  |
| Data Col | lection Form   |       |   | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |   |  |
|          |  |       |   | July 2013   |   |  |
|          |  |       |   |   | _ |  |
| <010>    | Study Area Code  |       | 421931  |   |   |  |
| <015>    | Study Area Name  |       | NORTHEAST MISSOURI RURAL TEL. CO.                         |   |   |  |
| <020>    | Program Year   |       | 2018  |   |   |  |
| <030>    | Contact Name - Person USAC should contact regarding this data                |       | Daryn Parker  |   |   |  |
| <035>    | Contact Telephone Number - Number of person identified in data line          |       | 7192664334 ext.   |   |   |  |
| <039>    | Contact Email Address - Email Address of person identified in data line      | <030> | dparker@tcatel.com  |   |   |  |
| <1000>   | Voice services rate comparability certification                              | Yes   |   |   |   |  |
| <1010>   | Attach detailed description for voice services rate comparability compliance |       |   |   |   |  |
|          |  |       | Name of Attached Documer                                  | t   |   |  |
| <1020>   | Broadband comparability certification  |       | - Pricing is no more than the Wireline Competition Bureau | e most recent applicable benchmark announced by     | r |  |
| <1030>   | Attach detailed description for broadband comparability compliance           |       |   |   |   |  |
|          |  |       | Name of Attached Docume                                   | nt  |   |  |

|        | o Terrestrial Backhaul Reporting<br>lection Form   | OM                                | C Form 481<br>1B Control No. 3060-0986/OMB Control No. 3060-0819<br>7 2013 |
|--------|--|-----------------------------------|--|
|        |  |                                   |  |
| <010>  | Study Area Code  | 421931                            |  |
| <015>  | Study Area Name  | NORTHEAST MISSOURI RURAL TEL. CO. |  |
| <020>  | Program Year   | 2018                              |  |
| <030>  | Contact Name - Person USAC should contact regarding this data  | Daryn Parker                      |  |
| <035>  | Contact Telephone Number - Number of person identified in data line <030>  | 7192664334 ext.                   |  |
| <039>  | Contact Email Address - Email Address of person identified in data line <030>  | dparker@tcatel.com                |  |
| <1100> | Certify whether terrestrial backhaul options exist (Y/N)   | Yes                               |  |
| <1130> | Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(a). | kbps                              |  |

| (1200) Te        | rms and Condition for Lifeline Customers  | FCC Form 481  |
|------------------|---|---|
| Lifeline         |   | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
| <b>Data Coll</b> | ection Form   | July 2013   |
|                  |   |   |
| <010>            | Study Area Code   | 421931  |
| <015>            | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO.                   |
| <020>            | Program Year  | 2018  |
| <030>            | Contact Name - Person USAC should contact regarding this data   | Daryn Parker  |
| <035>            | Contact Telephone Number - Number of person identified in data line <030>   | 7192664334 ext.                                     |
| <039>            | Contact Email Address - Email Address of person identified in data line <030  | dparker@tcatel.com                                  |
| <1210>           | Terms & Conditions of Voice Telephony Lifeline Plans  | 421931M01210.pdf                                    |
| <1220>           | Link to Public Website HTTP   | Name of Attached Document                           |
| or the we        | heck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report: |   |
| <1221>           | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,   |   |
| <1222>           | Details on the number of minutes provided as part of the plan,  |   |
| <1223>           | Additional charges for toll calls, and rates for each such plan.  |   |
|                  |   |   |

|           | rice Cap Carrier Additional Documentation<br>lection Form                     |                                   | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|-----------|---|-----------------------------------|---|
| Including | Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers     |                                   | July 2013   |
| <010>     | Study Area Code   | 421931                            |   |
| <015>     | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. |   |
| <020>     | Program Year  | 2018                              |   |
| <030>     | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker                      |   |
| <035>     | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.                   |   |
| <039>     | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com                |   |
|           |   |                                   |   |

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

#### **Incremental Connect America Phase I reporting**

| <2011>  | 3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.   |   |  |
|---------|---|---|--|
| <2022>  | Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4  |   |  |
| <2023>  | Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.  The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only. |   |  |
| <2024A> | Round 2 Recipient of Incremental Support?   |   |  |
| <2024B> | Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.  | Name of Attached Document Listing<br>Required Information |  |
| <2025A> | Round 2 Recipient of Incremental Support?   |   |  |
| <2025B> | Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).  | Name of Attached Document Listing<br>Required Information |  |
| <2015>  | 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)  |   |  |

| (2005) Price Cap  | Carrier Additional Documentation   | FCC Form 481  |                                       |
|-------------------|--|---|---------------------------------------|
| Data Collection F | Form   |   | . 3060-0986/OMB Control No. 3060-0819 |
| Including Rate-of | f-Return Carriers affiliated with Price Cap Local Exchange Carriers  | July 2013   |                                       |
| Price Ca          | p Carrier Connect America ICC Support {47 CFR § 54.313(d)}   |   |                                       |
| <2016>            | Certification support used to build broadband  |   |                                       |
| Connect           | America Phase II Reporting {47 CFR § 54.313(e)}  |   |                                       |
| <2017A>           | Connect America Fund Phase II recipient?   |   |                                       |
| <2017C>           | Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.   |   |                                       |
| <2018>            | Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)   | Name of Attached Document Listing<br>Required Information |                                       |
| <2019>            | Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C) |   |                                       |

| (3005) Rate Of Return Carrier Additional Documentation | FCC Form 481  |
|--|---|
| Data Collection Form                                   | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|  | July 2013   |

| <010> | Study Area Code   | 421931                            |
|-------|---|-----------------------------------|
| <015> | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. |
| <020> | Program Year  | 2018                              |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker                      |
| <035> | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.                   |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com                |

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

| (2000)  | Progress Report on 5 Year Plan  |                                      |                        |                  |
|---------|---|--------------------------------------|------------------------|------------------|
| (3009)  | Carrier certifies to 54.313(f)(1)(iii)  | V                                    |                        |                  |
| (3010A) | Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}   | 16                                   | es - Attach Certific   | 421931MO3010.pdf |
| (3010B) | Please Provide Attachment   | Name of Attached Docu<br>Information | ment Listing Required  |                  |
| (3012A) | Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}   | No - No New Community                | Anchors                |                  |
| (3012B) | Please Provide Attachment   | Name of Attached Docu<br>Information | ment Listing Required  |                  |
| (3013)  | Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}  | (Yes/No)                             | 0 0                    |                  |
| (3014)  | If yes, does your company file the RUS annual report  | (Yes/No)                             | • 0                    |                  |
| (3015)  | Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports   |                                      | V                      |                  |
| (204.6) | (Operating Report for Telecommunications  Borrowers)  Description (A) with Palance Short Income Statement   |                                      | ·                      |                  |
| (3016)  | Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows  |                                      |                        | 421931MO3017.pdf |
| (3017)  | If the response is yes on line 3014, attach your company's RUS annual report and all required documentation   | Name of Attached Docu<br>Information | ment Listing Required  |                  |
| (3018)  | If the response is no on line 3014, is your company audited?  | (Yes/No)                             | 0 0                    |                  |
|         | If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:   |                                      |                        |                  |
| (3019)  | Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS   |                                      |                        |                  |
| (3020)  | Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows   |                                      |                        |                  |
| (3021)  | Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line                        |                                      |                        |                  |
| (3022)  | 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers |                                      |                        |                  |
| (3023)  | Underlying information subjected to a review by an independent certified public accountant  |                                      |                        |                  |
| (3024)  | Underlying information subjected to an officer certification.   |                                      |                        |                  |
| (3025)  | Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows  |                                      |                        |                  |
| (3026)  | Attach the worksheet listing required information   | Name of Attached Docu<br>Information | ıment Listing Required |                  |

## **REDACTED**

[The Financial Statement of Northeast Missouri Rural Telephone Company filed pursuant to 47 C.F.R. § 54.313(f)(2) is redacted in its entirety as Highly Confidential Information]

| (4005) Rural Broadband Experiment Additional Documentation Data Collection Form | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|---|---|
|   | July 2013   |

| <010> | Study Area Code  | 421931                            |
|-------|--|-----------------------------------|
| <015> | Study Area Name  | NORTHEAST MISSOURI RURAL TEL. CO. |
| <020> | Program Year   | 2018                              |
| <030> | Contact Name - Person USAC should contact regarding this data        | Daryn Parker                      |
| <035> | Contact Telephone Number - Number of person identified in data li    | ne <030> 7192664334 ext.          |
| <039> | Contact Email Address - Email Address of person identified in data I | ine <030> dparker@tcatel.com      |

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

#### Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001**. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information

| Certification Data Collect | - Reporting Carrier<br>ion Form | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |  |  |
|----------------------------|---------------------------------|--|--|--|
| <010> St                   | udy Area Code                   | 421931   |  |  |
| <015> St                   | udy Area Name                   | NORTHEAST MISSOURI RURAL TEL. CO.  |  |  |
| <020> Pr                   | ogram Year                      | 2018   |  |  |

Daryn Parker 7192664334 ext.

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<030> Contact Name - Person USAC should contact regarding this data

Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030> dparker@tcatel.com

# Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

|       | tion - Agent / Carrier<br>lection Form  | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |  |
|-------|---|--|--|
| <010> | Study Area Code   | 421931   |  |
| <015> | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO.  |  |
| <020> | Program Year  | 2018   |  |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker   |  |
| <035> | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.  |  |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com   |  |

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier  |   |                      |  |  |  |
|--|---|----------------------|--|--|--|
| certify that (Name of Agent) TCA, Inc. is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. |   |                      |  |  |  |
| Name of Authorized Agent: TCA, Inc.  |   |                      |  |  |  |
| Name of Reporting Carrier: NORTHEAST MISSOURI RURAL TEL. CO.   |   |                      |  |  |  |
| Signature of Authorized Officer: CERTIFIED ONLINE  | Date:   | 06/26/2017           |  |  |  |
| Printed name of Authorized Officer: James Sherburne  |   |                      |  |  |  |
| Title or position of Authorized Officer: Chief Executive Officer   |   |                      |  |  |  |
| Telephone number of Authorized Officer: 6608744111 ext.  |   |                      |  |  |  |
| Study Area Code of Reporting Carrier: 421931 Filing  | g Due Date for this form: 07/03/2017  |                      |  |  |  |
| Persons willfully making false statements on this form can be punished by fine or for<br>under Title 18 of the U   | feiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or nited States Code, 18 U.S.C. § 1001. | fine or imprisonment |  |  |  |

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier |  |  |  |  |  |
|--|--|--|--|--|--|
|  | Columbia of Agent Authorized to the Authorized Science of Economic Science of Economic Science of Science of Economic Science of Sci |  |  |  |  |
|  | gent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided ta reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.  |  |  |  |  |
| Name c   | of Reporting Carrier: NORTHEAST MISSOURI RURAL TEL. CO.  |  |  |  |  |
| Name c   | of Authorized Agent Firm: TCA, Inc.  |  |  |  |  |
| Signatu  | ure of Authorized Agent or Employee of Agent: CERTIFIED ONLINE Date: 06/26/2017  |  |  |  |  |
| Name o   | of Authorized Agent Employee: Daryn Parker   |  |  |  |  |
| litle or   | r position of Authorized Agent or Employee of Agent Senior Financial Consultant  |  |  |  |  |
| Геlерhс  | one number of Authorized Agent or Employee of Agent: 7192664334 ext.   |  |  |  |  |
| Study A  | Area Code of Reporting Carrier: 421931 Filing Due Date for this form: 07/03/2017   |  |  |  |  |
|  | Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.   |  |  |  |  |

Attachments

# Northeast Missouri Rural Telephone Company FCC Form 481

#### **Line 510: Service Quality Standards & Consumer Protection Rules Compliance**

#### **Service Quality Standards**

NEMR hereby certifies that it is complying with applicable service quality standards and consumer protection rules.

#### **Description of Service Quality Standards and Consumer Protection Rules Compliance**

- NEMR follows the consumer protection, quality of service standard, service objective level, customer inquiry and customer dispute provisions of the state of Missouri as contained in Missouri Code of State Regulations 4 CSR 240 Chapter 28. NEMR is committed to providing the highest quality service to its customers.
- For the protection of consumer privacy, NEMR complies with the requirements of 47 CFR
  Part 64 Subpart U, Customer Proprietary Network Information and Subpart Y, Truth in Billing
  Requirements for Common Carriers, and Federal Trade Commission Red Flag rules to
  prevent identity theft. A company manual for CPNI and Red Flags is in place, and employee
  training is conducted annually and new hires are instructed on the programs as required by
  their job functions.

# Northeast Missouri Rural Telephone Company FCC Form 481

#### **Line 610: Functionality in Emergency Situations**

NEMR hereby certifies that it is able to function in emergency situations as set forth in the Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2)1 and the Missouri Code of State Regulations.

#### **Description of Functionality in Emergency Situations**

- NEMR maintains a Disaster Recovery manual, which in compliance with Missouri Public Service Commission rules, is available to the Missouri Public Service Commission's staff upon request.
- NEMR has a reasonable amount of back-up power to ensure functionality without an
  external power source, is able to reroute traffic around damaged facilities, and is capable of
  managing traffic spikes resulting from emergency situations.
- Specifically, each of NEMR's 14 wire centers is equipped with a 48 volt battery system capable of powering the equipment for 8 hours with no outside power source. A backup generator capable of running for an extended number of days is also located at each of the wire centers. NEMR has approximately 3,100 lines with metallic (copper) connections to the Central Office. There are approximately 3,200 lines with non-metallic (fiber optic) connections to the Central Office. These customers' NID's are battery powered in case of emergency. The batteries are rated to last 8 hours. NEMR has built redundant facilities between its exchanges and also back to its toll facilities which exit to the public switch telephone network. This redundant facility is in the form of SONET and Ethernet ring architecture. The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require. NEMR takes no responsibility for the capabilities of interconnected networks to manage traffic spikes resulting from emergency situations, but will continue its best efforts for its own network during such events.

| (700) Price Offerings including Voice Rate Data | FCC Form 481  |
|---|---|
| Data Collection Form                            | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|   | July 2013   |

| <010> | Study Area Code   | 421931                            |
|-------|---|-----------------------------------|
| <015> | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. |
| <020> | Program Year  | 2018                              |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker                      |
| <035> | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.                   |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com                |

<701> Residential Local Service Charge Effective Date 1/1/2017
<702> Single State-wide Residential Local Service Charge 18.0

<703>

| <a1></a1> | <a2></a2>       | <a3></a3>  | <b1></b1> | <b2></b2>         | <b3></b3>                    | <b4></b4>                   | <bs></bs>               | <c></c>                       |
|-----------|-----------------|------------|-----------|-------------------|------------------------------|-----------------------------|-------------------------|-------------------------------|
|           |                 |            |           | Residential Local |                              |                             | Mandatory Extended Area |                               |
| State     | Exchange (ILEC) | SAC (CETC) | Rate Type | Service Rate      | State Subscriber Line Charge | State Universal Service Fee | Service Charge          | Total per line Rates and Fees |
| MO        | All Exchanges   |            | FR        | 18.0              | 0.0                          | 0.0                         | 0.0                     | 18.0                          |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |
|           |                 |            |           |                   |                              |                             |                         |                               |

| (710) Broadband Price Offerings | FCC Form 481  |
|---------------------------------|---|
| Data Collection Form            | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|                                 | July 2013   |

| <010> | Study Area Code   | 421931                            |
|-------|---|-----------------------------------|
| <015> | Study Area Name   | NORTHEAST MISSOURI RURAL TEL. CO. |
| <020> | Program Year  | 2018                              |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Daryn Parker                      |
| <035> | Contact Telephone Number - Number of person identified in data line <030>     | 7192664334 ext.                   |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | dparker@tcatel.com                |

| <711> | <a1></a1> | <a2></a2>               | <b1></b1>   | <b2></b2>       | <c> <d1></d1></c> | <d2></d2>           | · <d3></d3>          |                 | <d4></d4>                                   |
|-------|-----------|-------------------------|-------------|-----------------|-------------------|---------------------|----------------------|-----------------|---|
|       |           | Exchange (ILEC)         | Residential | State Regulated | Total Rates       | Broadband Service - | Broadband Service    | Usage Allowance | Usage Allowance                             |
|       | State     | Exchange (ILEC)         | Rate        | Fees            | and Fees          | Download Speed      | -Upload Speed (Mbps) | (GB)            | Action Taken                                |
|       |           | All Exchanges           |             |                 |                   | (Mbps)              |                      |                 | When Limit Reached {select} Other, No Limit |
|       | MO        |                         | 39.95       | 0.0             | 39.95             | 12.0                | 1.0                  | 0               |   |
|       | MO        | Memphis,<br>Unionville  | 49.95       | 0.0             | 49.95             | 25.0                | 10.0                 | 0               | Other, No Limit                             |
|       | MO        | Green City,<br>Novinger | 49.95       | 0.0             | 49.95             | 25.0                | 10.0                 | 0               | Other, No Limit                             |
|       | MO        | Memphis,<br>Unionville  | 69.95       | 0.0             | 69.95             | 30.0                | 20.0                 | 0               | Other, No Limit                             |
|       | MO        | Green City,<br>Novinger | 69.95       | 0.0             | 69.95             | 30.0                | 20.0                 | 0               | Other, No Limit                             |
|       | MO        | Memphis,<br>Unionville  | 89.95       | 0.0             | 89.95             | 50.0                | 30.0                 | 0               | Other, No Limit                             |
|       | MO        | Green City,<br>Novinger | 89.95       | 0.0             | 89.95             | 50.0                | 30.0                 | 0               | Other, No Limit                             |
|       | MO        | Memphis,<br>Unionville  | 249.95      | 0.0             | 249.95            | 100.0               | 50.0                 | 0               | Other, No Limit                             |
|       | MO        | Green City,<br>Novinger | 249.95      | 0.0             | 249.95            | 100.0               | 50.0                 | 0               | Other, No Limit                             |
|       | MO        | Tobin Creek,<br>Brook   | 49.95       | 0.0             | 49.95             | 25.0                | 10.0                 | 0               | Other, No Limit                             |
|       | MO        | Tobin Creek,<br>Brook   | 69.95       | 0.0             | 69.95             | 30.0                | 20.0                 | 0               | Other, No Limit                             |
|       | MO        | Tobin Creek,<br>Brook   | 89.95       | 0.0             | 89.95             | 50.0                | 30.0                 | 0               | Other, No Limit                             |
|       | MO        | Tobin Creek,<br>Brook   | 249.95      | 0.0             | 249.95            | 100.0               | 50.0                 | 0               | Other, No Limit                             |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
|       |           |                         |             |                 |                   |                     |                      |                 |   |
| I     |           | <u>l</u>                | II.         | 1               |                   |                     |                      |                 |   |

### Northeast Missouri Rural Telephone Company Low-Income Telephone Assistance Program Terms & Conditions

The Company provides unlimited local calling for residential customers at a discount of \$9.25 a month for basic lifeline. The lifeline service from Northeast Missouri Rural Telephone Company provides access to emergency, operator, interexchange, and directory assistance services. The service does not include enhanced calling features such as voice mail, caller ID, call forwarding, internet or long distance telephone service. Toll Restriction service is provided at no charge for Lifeline customers.

421931mo1210

Northeast Missouri Rural Telephone Co.

P.S.C. MO. NO. 2

3<sup>rd</sup> Revised Sheet No. 4-31

Cancels 2nd Revised Sheet No. 4-31

#### LOCAL EXCHANGE SERVICE

4. Local Exchange Service (Cont'd)

#### 4.9 Lifeline Service

#### A. General

- Lifeline Service is available to qualifying low-income subscribers for slugle party residence service.
- 2. The monthly discount will be the maximum amount allowed by the Missouri Public Service Commission and the Federal Communications Commission; however, this discount will not exceed the sum of the federal subscriber line charge and the recurring charges for voice telephony service. The monthly discount will be the same for Lifeline customers solely subscribing to voice telephony service and for Lifeline customers subscribing to a bundle of services.
- 3. Lifeline Service will not be furnished on a Foreign Exchange service.
- Lifetine Service shall not be disconnected for non-payment of tell charges providing the Lifetine customer subscribes to Tell Blocking Service.
- Toll Blocking Service provides a means of restricting access to the Long Distance Message Telecommunications Network. Toll Blocking for the purposes of Lifeline Service will restrict 1+, 0+ and 0- (operator hundled) calls.
  - If the oustomer chooses "Toll Blooking Service" the company will not charge a service deposit.
  - The rate for toil blooking will be charged on a monthly basis as specified in Service Restrictions.

(D)

(C)

(C)

Issued: March 19, 2012

James Sherburne General Manager 718 S, West Street Green City, Missouri 63545 Effective: April 18, 2012

Filed Missouri Public Service Commission JI-2012-0482 421931mo1210

Northeast Missouri Rural Telephone Co.

P.S.C. MO. NO. 2 1st Revised Sheet No. 4-32 Cancels Original Sheet No. 4-32

#### LOCAL EXCHANGE SERVICE

- 4. Local Exchange Service (Cont'd)
  - 4.9 Lifeline Service (Cont'd)
    - B. **Eligibility Requirements** 
      - 1. An applicant must meet all of the following criteria in order to qualify for Lifeline
        - a. To qualify for Lifeline the consumer must participate in one of the following programs:
          - Modicald
          - 2) Food stamps
          - Supplemental Security Income (SSI)
          - 3) Federal Public Housing Assistance or Section 8
          - Low Income Home Energy Assistance Program
          - Temporary Assistance to Needy Families (TANF)
          - National Free Lunch Program
          - The customer's income, as defined in 47 GFR Section 54,400(f), must be at or below 135% of the Federal Poverty Guidelines (off. June 1, 2012).
      - 2. The customer must sign, under penalty of perjury a document certifying:
        - a. Ho/she is receiving benefits from one of the programs in B.1.a above,

        - Name of the program(s) from which they are receiving benefits.

          That he/she will notify the company if he/she no longer participates in the program(s) named in a, proceding,
      - 3. The premises at which the residence service is requested must be the applicant's principal piace of residence.
      - 4. There is only one telephone line serving the residence premises. The residence promises household (dwelling unit) shall consist of that portion of an individual house or building or one flat or apartment occupied by a single family or Individuals functioning as one demestic establishment.
      - 5. Customer Annual Responsibility

All Lifeline customers as of June 1, 2012 must certify with the Company that they ere still eligible for Lifeline support by December 31 each year. Customers may certify in person, over the phone or in writing. Customers will not be required to provide verifying documentation;

6. Access Recovery Charge (ARC)

Eligible Lifeline customers are exempt from ARC (effective July 1, 2012).

(N)

(N)

(T) (Y) (Y)

Issued: March 19, 2012

James Sherburne General Manager 718 S. West Street Green City, Missouri 63545

Effective: April 18, 2012

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Northeast Missouri Rural Telephone Co.

P.S.C. MO. NO. 2

3<sup>rd</sup> Revised Sheet No. 4-33
Cancels 2<sup>nd</sup> Revised Sheet No. 4-33

#### LOCAL EXCHANGE SERVICE

- 4. Local Exchange Service (Cont'd)
  - 4.9 Lifeline Servicy (Cont'd)
    - C. Missouri USF Low-Income Assistance
      - Caneral A low-income customer is any pustomer who requests or receives
        residential essential local telecommunications service and who has been certified
        by the Department of Social Services (DSS) as economically disadvantaged.
        Qualified individuals will receive discounted services under chiler the low-income
        assistance or the disabled assistance program.
      - Regulations -- Low income assistance is available to all residential oustomers who
        demonstrate, by soif certifying with the company under penalty of perjury, that
        they are eligible for support by participation in;
        - n. Medfeuld
        - b. Food Stamps
        - o. Supplementary Security Income (SSI)
        - d. Federal Public Housing Assistance or Section 8
        - c. Low Income Home Energy Assistance Program (LIHEAP)
        - National Pres Lunch Program
        - g. Temporary Assistance to Needy Families
        - h. The customer's income as defined in 47 CPR Section 54,400(f), must be at or below 135% of the Federal Poverty Guidelines (offective June 1, 2012).

(N)

- Eligible Services -- Essential local telecommunications service is defined as two (2)
  way switched voice residential service within a local calling scope as determined
  by the commission, comprised of the following services and their recurring
  charges:
  - Single line residential service, including touch-tong dialing and any applicable mlieage or zone charges
  - Access to local amergency services, including, but not limited to, 911 service established by local authorities
  - o. Acces to basic local operator services
  - d. Access to basic local directory assistance
  - c. Standard Intercept service
  - Equal access to Inter-Exchange Carriers consistent with rules and regulations of the FCC
  - g. One (1) standard white pages directory listing
  - h. Toll blocking or toll control for qualifying low-income customers
- 4. Support Amount Customers eligible under the established criteria can receive a discount from their bill for essential local telecommunications service equal to the amounts approved by the Missouri Public Service Commission and the Federal Communications Commission. The amount of combined Tederal and state lifeline support for any customer will not exceed the sum of the federal Subscriber Line Charge (SLC) and the recurring charges for assential local telecommunications services (including the basic service rate, touch-tone calling charge, extended area service additive, and callege additives, if any).

Issued: March 19, 2012

James Sherburne General Manager 718 S. West Street Green City, Missouri 63545 Bifuotive: April 18, 2012

Filed Missouri Public Service Commission JI-2012-0482 Northeast Missouri Rural Telephone Co.

P.S.C. Mo. No. 2 2<sup>nd</sup> Revised Sheet No. 4-34 Replacing I<sup>st</sup> Revised Sheet No. 4-34

#### LOCAL EXCHANGE SERVICE

- 4. <u>Local Exchange Service</u> (Cont'd)
  - 4.9 <u>Lifeline Services</u> (Cont'd)
    - D. Missouri USF Disabled Assistance
      - 1. General A disabled customer, or a dependent, is a customer who requests or receives residential essential local telecommunications service, as defined in section 1(c) of this tariff, and meets the eligibility requirements set forth in this tariff.
      - 2. Regulations Disabled assistance is available to all residential customers who demonstrate, by self certifying with the company under penalty of perjury, that they, or a dependent, are totally and permanently disabled or blind and receiving any of the following:
        - a. Federal Social Security Disability benefits.
        - b. Veterans Administration benefits.
        - c. State blind pension pursuant to Section 209.010 to 209.160 RSMo.
        - d. State aid to blind persons pursuant to Section 209.240 RSMo.
        - e. State supplemental payments pursuant to Section 208.030, RSMo Section 660.100.2 RSMo 200.
      - 3. Support Amount Customers eligible under the established criteria can receive a discount equal to the amount approved by the Missouri Public Service Commission from their bill for essential local telecommunications service. The amount of state lifeline support for any customer will not exceed the recurring charges for essential local telecommunications services (including the basic service rate, Touch-Tone calling charge, extended area service additive, and mileage additives, if any).

Issued: October 16, 2014 Effective: November 15, 2014

James Sherburne General Manager 718 S. West Street Green City, MO 63545

FILED Missouri Public Service Commission JI-2015-0161 (D)

#### **MILESTONE CERTIFICATION**

June 20, 2017

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12<sup>th</sup> Street SW
Room TW-A325
Washington, D.C. 20554

Re: Form 481 Line 3010 - Milestone Certification Pursuant to 47 C.F.R. § 54.313(f)(1)(i)

Dear Ms. Dortch:

Northeast Missouri Rural Telephone Company, Study Area Code 421931, in accordance with 47 C.F.R. § 54.313(f)(1)(i) of the Commission's rules, herby certifies that it is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time.

Respectfully submitted,

James Sherburne

CEO, Northeast Missouri Rural Telephone Company

## **REDACTED**

[The Financial Statement of Northeast Missouri Rural Telephone Company filed pursuant to 47 C.F.R. § 54.313(f)(2) is redacted in its entirety as Highly Confidential Information]